

Hamlin Tool & Machine, Inc.
1671 East Hamlin Rd

Rochester, MI 48307

REMIT TO:
Hamlin Tool & Machine Company
1671 East Hamlin Rd

INVOICE NUMBER
SID 064646

Rochester, MI 48307

S GMC1200
 O DELPHI SAGINAW
 L
 D NAO DISBURSEMENTS
 INVOICELESS SUPERVISOR
 PONTIAC, MI 48343-6040
 T
 O

S 05
 H DELPHI S PLANT 5 FWD AXLES
 I
 P 3900 EAST HOLLAND RD
 CISCO: 44025 SAP#K905
 SAGINAW, MI 48601
 T United States
 O

SUPPLIER CODE		TERMS	F.O.B.	INVOICE DATE		
057015273		2nd day 2nd month	ROCHESTER, MI	10/04/05		
SHIP DATE	SHIPPER NO.	SHIPPED VIA	GROSS	TARE	NET	
10/04/05	064646	BAX GLOBAL	93	21	90	
P.O. NUMBER	CUSTOMER PART NUMBER DESCRIPTION		QUANTITY SHIPPED	UOM	UNIT PRICE	AMOUNT
SAG9010236	07834482 RETAINER, GREASE INTERNAL #: 1159		6,000	EA	0535	\$321.00
					Subtotal	\$321.00
					Sales Tax	\$0.00
					Freight Charges	\$0.00
					Invoice Total	\$321.00
					Disc Available	\$0.00
					Funds: USD	



1671 East Hamlin Road
Rochester, Michigan 48307
Phone: 248-651-6302
Fax: 248-651-0703
DUNS #057015273

1200
GMAC-DELPHI SAGINAW
NAO DISBURSEMENTS
INVOICELESS SUPERVISOR
P.O. BOX 436040
PONTIAC, MI 48343-6040
SHIPPED WAX GLOBAL
JUN 9 1991 915273

We hereby certify that these goods were produced in compliance with all applicable requirements of Section 6, 7, and 12 of the Fair Labor Standards Act, as amended, and of the regulations and orders of the United States Department of Labor issued under Section 14 thereof.

HFO-22 REV. LVL: A 1/23/96

NUMERICAL FILE COPY

GLOBAL IRVINE, CA 92602		440 Exchange													
1-800-CALL-BAX FOR INFORMATION OR THE BAX OFFICE NEAREST YOU															
 SERVICE REQUESTED GUARANTEED SERVICES <input type="checkbox"/> Call Your Local Bax Station <input type="checkbox"/> Guaranteed First Arrival (EMR 1) <input type="checkbox"/> Guaranteed Overnight (EMR 2) <input type="checkbox"/> Guaranteed Airport-to-Airport (EMR 3) <input type="checkbox"/> Guaranteed 2nd Day (ERZ D)															
CONSIGNEE'S ACCOUNT NO. AIRBILL NUMBER DEPT/FLOOR COMPANY TO (CONSIGNEE NAME) PHONE NO. ACCUATE STREET ADDRESS (BAX CANNOT DELIVER TO A P.O. BOX) CITY STATE ZIP (REQUIRED) ZIP (REQUIRED) STATE ZIP (REQUIRED)															
5. HANDLING INFORMATION (* SPECIAL RATE MAY APPLY) <input type="checkbox"/> HOLD <input type="checkbox"/> DANGEROUS <input type="checkbox"/> SATURDAY <input type="checkbox"/> SPECIAL <input type="checkbox"/> CONVENTION <input type="checkbox"/> AT BAX <input type="checkbox"/> GOODS <input type="checkbox"/> SUNDAY <input type="checkbox"/> DELIVERY <input type="checkbox"/> CONVENTION SPECIAL INSTRUCTIONS/ADDITIONAL REFERENCE INFORMATION: RMK 1 RMK 2 <table border="1"> <thead> <tr> <th>NO. OF POS.</th> <th>WEIGHT</th> <th>LENGTH</th> <th>WIDTH</th> <th>HEIGHT</th> <th>DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>97.3</td> <td>33</td> <td>33</td> <td>12</td> <td>Metal Part</td> </tr> </tbody> </table> REREWEIGH TOTAL PCS. TOTAL WT. REREWEIGH RELEASE SIGNATURE X RELEASER SIGNATURE X RELEASER SIGNATURE X DECLARED VALUE \$ RECEIVED BY BAX AT CHARGES ADVANCED PRO NUMBER CARRIER NAME LIMIT LIABILITY IS AGREED AND UNDERTAKEN TO BE \$100.00 OR \$100.00 PER POUND, WHICHEVER IS GREATER, UNLESS A HIGHER VALUE IS DECLARED AND APPROPRIATE CHARGES PAID. SEE REVERSE SIDE OF AIRBILL PARAGRAPH E FOR RECARDED VALUE LIMITATIONS.				NO. OF POS.	WEIGHT	LENGTH	WIDTH	HEIGHT	DESCRIPTION	1	97.3	33	33	12	Metal Part
NO. OF POS.	WEIGHT	LENGTH	WIDTH	HEIGHT	DESCRIPTION										
1	97.3	33	33	12	Metal Part										
6. BILLING INFORMATION PREPAID (\$ SHIPPER) \$ CASH RECEIVED PAID IN ADVANCE RATE QUOTE NUMBER COLLECT <input type="checkbox"/> (CONSIGNEE) 3RD PARTY (ACCT. NO. REQ'D.) CO.G.D. BAX GLOBAL WILL COLLECT CONSIGNEE'S CHEQUE MADE PAYABLE ONLY TO THIS SHIPPER FOR THE AMOUNT OF THE GOODS IN THE AMOUNT SHOWN. AIRBILL NUMBER b50714706 SHIPPER / REPRESENTATIVE SIGNATURE: SIGN NAME X PICK UP DATE: 10/14/2009 PICK UP TIME: 3:45pm DRIVER: No. I certify that this cargo does not contain any unauthorized explosives, incendiaries or hazardous materials. I consent to a search of this cargo. I am aware that this endorsement and original signature, along with other shipping documents, will be retained on file for at least thirty days.															
7. RECEIVED BY BAX GLOBAL DRIVER / AGENT Driver Signature: R.C. REILLY PICK UP DATE: 10/14/2009 Print Name: Print Name: Driver: No. Pick Up Date: 10/14/2009 Pick Up Time: 3:45pm Conditions of Carriage On Reverse Side (IN ORDER TO EXPEDITE SHIPMENT MAY BE DIVERTED TO MOTOR OR OTHER CARRIER AS PER TARIFF RULE UNLESS SHIPPER GIVES OTHER INSTRUCTIONS HEREON.)															
8. FOR BAX GLOBAL USE ONLY PRINT NAME X DATE 10/14/09 1st personal ID reviewed: <table border="1"> <tr> <td><input type="checkbox"/> appearing on ID</td> <td><input type="checkbox"/> Matched photo on ID?</td> </tr> <tr> <td><input type="checkbox"/> YES</td> <td><input type="checkbox"/> NO</td> </tr> </table> 2nd personal ID reviewed: <table border="1"> <tr> <td><input type="checkbox"/> appearing on ID</td> <td><input type="checkbox"/> Matched photo on ID?</td> </tr> <tr> <td><input type="checkbox"/> YES</td> <td><input type="checkbox"/> NO</td> </tr> </table> # government forms of ID, one of which must be government-issued, non-photo. No Negotiable Airbill SHIPPER COPY				<input type="checkbox"/> appearing on ID	<input type="checkbox"/> Matched photo on ID?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> appearing on ID	<input type="checkbox"/> Matched photo on ID?	<input type="checkbox"/> YES	<input type="checkbox"/> NO				
<input type="checkbox"/> appearing on ID	<input type="checkbox"/> Matched photo on ID?														
<input type="checkbox"/> YES	<input type="checkbox"/> NO														
<input type="checkbox"/> appearing on ID	<input type="checkbox"/> Matched photo on ID?														
<input type="checkbox"/> YES	<input type="checkbox"/> NO														

10/04/05

RECEIVED subject to the classifications and tariffs in effect on the date of issue of this Original Bill of Lading

Pg 4 of 4

SID# 64646

CARRIER: BAX GLOBAL

BAXG

CARRIER'S NO.:
SHIPPER'S NO.:

From HAMLIN TOOL AND MACHINE COMPANY, INC.

At ROCHESTER, MICHIGAN 48307

D-U-N-S #057015273

The property described below in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to DELPHI S PLANT 5 FWD AXLES
3900 HOLLAND RD.
CISCO: 44025 SAP#: K905

(Mail or street address of consignee — For purposes of notification only)

SAGINAW, MI 48601

NO. PACKAGES	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	WEIGHT (SUBJECT TO CORRECTION)	CLASS RATE OR	CHECK COL.
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Supplier# 057015273 SID #

3 PCS71 CARTON	64646	90 NET WT.
		3 TARE WT.
		93 GROSS WT.

DELPHI S PLANT 5 FWD AXLES

===== T O T A L S =====
90 TOT NET 3 TOT TAR 93 TOT GRS

PCS71~3

CLASS RATE: 50 AUTOMOTIVE METAL PARTS
3RD PARTY COLLECT
BILL: DELPHI S, 44025 SAGINAW MI c/o
DATA 2 LOGISTICS P/O BOX 9115 NORWOOD, MA 02362

Trailer#: 6149

ShipTime: 10-4-05

340pm

R. Greg Bax

Subject to Section 7 of conditions of applicable bill of lading. If this shipment without recourse on the consignee, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges	If charges are to be prepaid, write or stamp here, "To be Prepaid". Per _____ (Signature of Consignor)	Received \$ _____ to apply in prepayment of the charges on the property described hereon Agent or Cashier _____ Per _____ (The signature here acknowledges only the amount prepaid)	Received \$ _____ to apply in prepayment of the charges on the property described hereon Agent or Cashier _____ Per _____ (The signature here acknowledges only the amounts prepaid)	Charges advanced: \$ _____	C.O.D. SHIPMENT C.O.D. AMT _____ Collection Fee _____ Total Charges _____
--	--	--	---	----------------------------	--

This is to certify that the above articles are properly described by name and are packed and marked and are in proper condition for transportation according to regulations by the Interstate Commerce Commission.
If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's weight.
† Shipper, instead in lieu of stamp, not a part of Bill of Lading approved by the Interstate Commerce Commission,
NOTE: When the value of the property is less than the declared value, shippers are required to state specifically the agreed or declared value of the property per
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____

THIS SHIPMENT IS CORRECTLY DESCRIBED

CORRECT WEIGHT IS _____ LBS

† The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Consolidated Freight Classification.

HAMLIN
TOOL AND MACHINE COMPANY, INC.
1671 EAST HAMLIN ROAD
ROCHESTER, MICHIGAN 48307

Shipper, Per _____ Agent, Per _____

Permanent post office address of shipper

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